	CLAIMS A	(Colum	R FILED	(Coh	umn 2)_	SMAL TYPE	L EN	09		S9 14 OTHE	R THAN
FOR TOTAL CHARGEAE NDEPENDENT CL TULTIPLE DEPENE	AIMS	105 NUMBE	R FILED		umn 2)	TYPE	-				
TOTAL CHARGEA NDEPENDENT CL RULTIPLE DEPEND	AIMS	NUMBE		NR OLE		047			OA T		ENTIT
NDEPENDENT CU	AIMS	-		NUMBER EXTRA		BASIC		355.00	4	RATE	FEE
IULTIPLE DEPENI		100"	10.5 minus 20=		85		7			BASIC FE	F 710.0
		15 minus 3 =				XS:	<u>'-</u>	765.0	OR	X\$18=	
M. at. ann.	MULTIPLE DEPENDENT CLAIM PR			10	12		-	480-0	OR	X80=	
						+135	-		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2					column 2	TOT	T	6000	OR	TOTAL	
1-29-06 Column 1) 11-5-04 (Column 2) (Column 3)						SMA		NTITY	OR		THAN
Yotal Independent	CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID F	BER	PRESENT EXTRA	RATI		ADDI- IONAL FEE		RATE	ADDI- TIONA - FEE
Total	38	Minus.	10	5		X\$-9	. [OR	X\$18=	
Independent • PRST PRESEN	TATION OF ASI	Minus		5	•	X40-	1		OR	X80=	
Transcrit		A. HPCE UE	PENUENT	CLAIM		+135	,		OR	+270=	
9-7-05						TOT ADDIT, FI				TOTAL	
7-1-00	(Column 1)		(Colum		(Column 3)				,		
	REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID R	ER USLY	PRESENT EXTRA	RATE	n	VOOI- ONAL FEE		RATE	ADDI- TIONAL FEE
Total • Independent •	38	Minus	-	5	·	X\$ 9=	Т		OR	X\$18=	TEE
FIRST PRESENT	ATION OF MU	Minus LTIPLE DEF	ENDENT C			X40=			OR	X80=	
						+135=			OR	+270=	
-20-0b						ADDIT, FE			OR A	TOYAL DOIT, FEE	
2000	Column 1)		(Column		Column 3)						
A	REMAINING AFTER MENDMENT		NUMBE PREVIOUS PAID FO	SLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL	ſ	RATE	ADDI- TIONAL
Total •	· .	dinus .	**			X\$ 9=	广	EE	_	X\$18=	FEE
Independent •		Ainus euni)	***			X40=	╁)R		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								^c)A	X80=	·
If the entire in ordered 1 is been then the						+135=		d	R	-270=	
I the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3." The "Wifth Number Number To."									H AD	YOTAL OIT, FEE	
he Toghasi Number	Previously Paid F	or (Total or)	orace is le independent)	is the M	igheat umaper ic if euser "3".	ADDIT, FEE	propri	iste box ir	CONTENT	n 1.	